

# Navigating the World of Your State Benefits



FY 2022-23

**Employee Benefits Guide** 

## Welcome to Your State of Colorado Benefits

State employees,

I'm proud to say that we have added many new offerings to the State of Colorado benefits package that will help support you and your loved ones. We are pleased to share with you that there is no increase in employee premiums this year.

Open Enrollment is passive this year, meaning there is no action needed on your part to keep your current benefits, unless you have a Flexible Spending Account (FSA). If you have an FSA, you will have to re-enroll. Every employee should confirm that the benefit selections in the system are accurate. Errors not caught by the end of the corrections period cannot be corrected later in the year.

We have made several improvements for the new plan year. Of particular note, the State will now offer the no-cost Basic Vision plan to all employees, including those not enrolled in a medical plan. Visit the **New Benefits & Changes page** to see all the plan improvements.

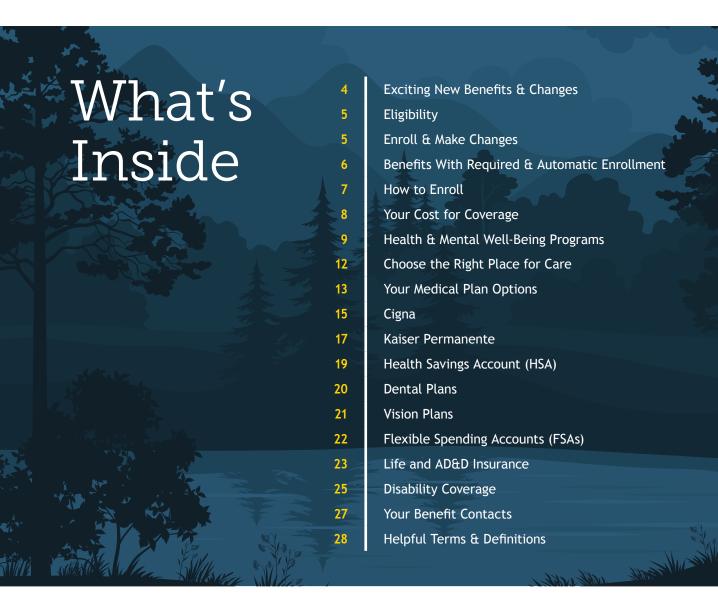
One more new offering I'd like to highlight is STATE OF HEALTH. It's a no-cost health improvement program available to all State employees to guide you to your physical and mental life goals. By just enrolling, participants receive their \$20 per month wellness credit (starting the following plan year). After they complete the program, they again earn the \$20 per month credit (for the plan year following program completion). That's a total of \$480 in savings over two years. Please consider taking advantage of this program.

Thank you for being a valued member of the State of Colorado team,

Tony Gherardini

State Personnel Director







## THIS GUIDE IS CLICKABLE

This guide is designed to give you quick access to your benefits information:

Enrollment	Cost of Coverage	Wellness	Health Plans	Financial	Contacts	

Use the top menu to go directly to a chapter within this guide.

Use the sub-navigation to go directly to a specific page within



the current chapter.

Click this icon below to enjoy the full screen experience.

## Exciting New Benefits & Changes



#### **Gender-Affirming Care**

Many gender-affirming treatments and surgeries are covered by all medical plans. Visit the medical plan summaries at dhr.colorado.gov/medical-benefits to learn more.



#### **Preventive Medication Expansion**

Many preventive medications, including insulin, diabetic supplies, some cardiovascular drugs, antidepressants, and more, are now covered at NO COST.



#### Healthcare Bluebook

Cigna members can connect with high-quality providers and earn cash back. This tool ranks healthcare providers based on quality and efficiency for over 400 medical procedures and pays you cash when you use one of the designated high-quality providers.



#### 311 Acupuncture

Acupuncture is now covered on all medical plans. Visit the medical plan summaries at dhr.colorado.gov/medical-benefits to learn more.



#### Colonoscopies

Preventive and diagnostic colonoscopies are covered at 100% with all medical plans, whether or not polyps are removed.



#### **Hearing Aids**

All medical plans now have a hearing aid hardware allowance. Visit the medical plan summaries at dhr.colorado.gov/medical-benefits to learn more.



#### **Mental Wellness**

NO-COST outpatient mental health services with copay medical plans. Kaiser Permanente High-Deductible Health Plan (HDHP) members must meet their deductible before 100% coverage. Cigna HDHP members receive three no-cost visits per issue, per year.



#### Separate Vision Plan

A NO-COST Basic Vision plan is available to all employees regardless of medical plan enrollment.



#### **Tobacco Surcharge**

NO MORE tobacco surcharge. Want to guit? STATE OF HEALTH will help you develop a plan and support your efforts throughout the year-long program.

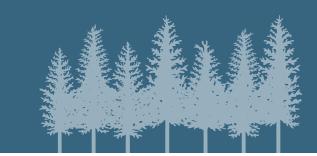
## STATE OF HEALTH





STATE OF HEALTH supports and guides employees to their physical and mental life goals. By just enrolling, participants receive a \$20 per month wellness credit (starting the following plan year). After they complete the program, they again earn the \$20 per month credit (for the plan year following program completion), totaling \$480 off medical premiums. You'll see the discount on your paystub.

Take advantage of this opportunity to make lasting improvements to your health. Your loved ones will thank you. Fill out your application today at ColoradoStateOfHealth.com.



Permanent full-time and part-time employees (and their eligible dependents) can participate in State of Colorado benefits. Temporary and seasonal employees are not eligible.

Eligible dependents include:

- Your legal spouse or civil union partner
- Your natural, adopted, or stepchildren (up to age 26)
- Eligible child(ren) of any age who were disabled before age 26

PLEASE NOTE: Benefit-eligible employees may elect medical, dental, vision, and optional life coverage for you and your eligible dependents.

## Enroll & Make Changes

Carefully review the benefits available to you and choose the best package for you and your budget. Your enrollment choices will remain in place for the remainder of the plan year (July 1, 2022 - June 30, 2023).

You can enroll in or change your benefits:

- 1. Within 31 days of your hire date
- 2. During the annual Open Enrollment (OE) period
- 3. Within 31 days of a Qualifying Life Event (QLE)

PLEASE NOTE: Newborns are not automatically added to your plan. You must add them in benefitsolver within 31 days of birth. Do not wait until you receive the birth certificate.

## What's a Qualifying Life Event?



- Marriage, divorce, or legal separation
- Birth or adoption of a child
- Spouse's Open Enrollment
- Death of a dependent
- Loss or gain of other health coverage for you and/or dependents
- Change in employment status
- Change in Medicaid/Medicare eligibility for you or a dependent (within 60 days)
- Receipt of a Qualified Medical Child Support Order

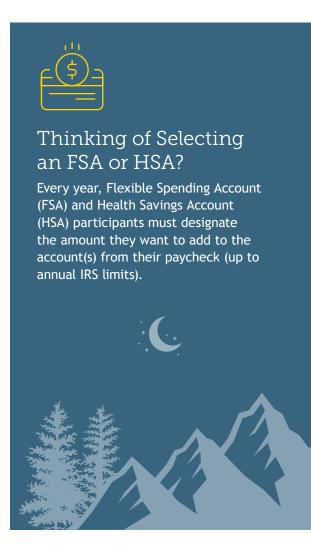
For a full list of QLEs, visit the Eligibility & Enrollment section at dhr.colorado.gov/state-employees/benefits.

## Benefits With Required & Automatic Enrollment

Some benefits require active enrollment, while others are included automatically. See the chart below for details.

Enrollment Required	Automatic Enrollment
To participate in any of the following coverage options, you must enroll or elect as a new hire, during OE, or following a QLE.	Enrollment in the following plans is automatic. No additional steps needed.
Benefits will start on the first of the month following eligibility and after enrollment in <b>benefitsolver</b> .	Benefits will start on the first of the month following eligibility and after enrollment in <b>benefitsolver</b> .
Medical	Basic Life and AD&D
Medical Supplement Program	Short-Term Disability
Dental	
Vision*	
Enhanced Vision	
Health Savings Account (HSA)**	
Flexible Spending Account (FSA)	
Optional Life and AD&D	
Optional Long-Term Disability	
Retirement***	

<sup>\*</sup>Vision coverage was previously bundled with medical coverage. If your household is currently enrolled in a medical plan, you do not need to enroll in vision to keep your current vision benefits. If you want to enroll in or make changes to your vision plan for FY 2022-23, you can do so during OE or a QLE. Employees can also enroll in the Basic Vision plan without enrolling in a medical plan.



<sup>\*\*</sup>Coverage effective after Optum Bank account confirmation is received by the State of Colorado.

<sup>\*\*\*</sup>Retirement enrollment is required for the Public Employees' Retirement Association (PERA) DB or DC plan. For details, please contact PERA at 800-759-7372.

## How to Enroll

# 1. Ask Yourself the Important Questions



- Who should I cover?
- Evaluate your coverage options for your household (including all dependents who meet eligibility requirements). You are required to provide proof of eligibility for any new dependent added to your coverage. The State of Colorado may conduct a dependent eligibility audit at any time.
- How much did I spend on healthcare last year and how much can I afford to spend this year?
   Consider your past expenses and your current budget to select a plan with the coverage you need at an affordable price.
- Do I need more or less health coverage?
   Are you having a baby? Considering a surgery?
   Currently in treatment for a chronic condition?
   Estimate the level of healthcare you may need in the upcoming year.

## 2. Review Your Options

Use this guide to compare your options, plan costs, and potential savings.



#### 3. Enroll Online

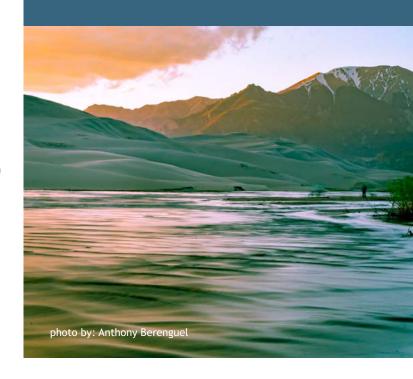
- Go to benefitsolver.com
- Enter your username and password
- First-time user? Click, 'register' and enter the company key, 'soc' (case-sensitive)
- Follow the prompts to select or decline (waive) each of your benefit options
- Submit your elections (click, 'approve,' then confirm)

# 4. Confirm Your Elections & 以 Print Your Benefits Summary

Even if you're not making changes, review your elections carefully and make sure your benefits and dependent information are correct. Internal Revenue Service (IRS) and insurance company rules restrict the ability to make changes during the year (except for a Qualifying Life Event (QLE)).

## BenefitHub Discount Program

BenefitHub is a marketplace where State employees can take advantage of thousands of amazing discounts and cashback offers. Visit StateofColorado.benefithub.com to start saving today.



## Your Cost for Coverage

Monthly and bi-weekly payroll deductions for medical, dental, and vision plans are shown below.

## Monthly Premiums

Benefit Plan	Employee Only	Employee + Spouse	Employee + Child(ren)	Employee + Family
Medical				
Cigna HDHP	\$24.24	\$145.72	\$55.00	\$232.22
Cigna Copay Basic	\$35.96	\$178.64	\$66.10	\$251.28
Cigna Copay Plus	\$85.06	\$268.94	\$147.82	\$408.08
Kaiser Permanente HDHP	\$25.78	\$156.54	\$51.32	\$197.02
Kaiser Permanente Copay Basic	\$34.80	\$172.24	\$65.58	\$284.12
Kaiser Permanente Copay Plus	\$54.42	\$244.82	\$116.24	\$387.80
Dental				
Delta Dental Basic	\$4.44	\$16.28	\$15.24	\$27.98
Delta Dental Basic Plus	\$9.80	\$26.74	\$26.24	\$44.06
Vision				
EyeMed Vision Basic	\$0	\$0	\$0	\$0
EyeMed Vision Enhanced	\$4.40	\$8.36	\$8.80	\$12.92

## Bi-Weekly Premiums

Benefit Plan	Employee Only	Employee + Spouse	Employee + Child(ren)	Employee + Family
Medical				
Cigna HDHP	\$12.12	\$72.86	\$27.50	\$116.11
Cigna Copay Basic	\$17.98	\$89.32	\$33.05	\$125.64
Cigna Copay Plus	\$42.53	\$134.47	\$73.91	\$204.04
Kaiser Permanente HDHP	\$12.89	\$78.27	\$25.66	\$98.51
Kaiser Permanente Copay Basic	\$17.40	\$86.12	\$32.79	\$142.06
Kaiser Permanente Copay Plus	\$27.21	\$122.41	\$58.12	\$193.90
Dental				
Delta Dental Basic	\$2.22	\$8.14	\$7.62	\$13.99
Delta Dental Basic Plus	\$4.90	\$13.37	\$13.12	\$22.03
Vision				
EyeMed Vision Basic	\$0	\$0	\$0	\$0
EyeMed Vision Enhanced	\$2.20	\$4.18	\$4.40	\$6.46



## Get Help Paying for Medical & Dental Premiums

The Medical Supplement Program helps employees who meet certain household income requirements and are covering child(ren) with the cost of their medical and dental premiums.

To receive this subsidy, you must apply every year during Open Enrollment (OE). Visit dhr.colorado.gov/supplement-program to learn more.



## Save \$\$\$ With MotivateMe

Participants in the MotivateMe wellness program, offered by the State of Colorado, can receive a \$20 per month discount (a total of \$240 per year). Visit <a href="mailto:dhr.colorado.gov/employee-wellness-program">dhr.colorado.gov/employee-wellness-program</a> to learn more.

## Health & Mental Well-Being Programs

## STATE OF HEALTH Wellness Program

Get started on your path to good health. The STATE OF HEALTH wellness program is available to employees enrolled in Cigna or Kaiser Permanente medical plans. This no-cost, year-long program is designed to support your health and wellness goals.

By just enrolling, participants receive their \$20 per month wellness credit (starting the following plan year). After they complete the program, they again earn the \$20 per month credit (for the plan year following program completion). You'll see the discount on your paystub.

#### STATE OF HEALTH offers three pathways to support you:

- Intensive path (with up to 12 health coaching sessions)
- Supportive path (with six health coaching sessions)
- Self-directed path (primarily for employees who do not want to work with a health coach)

Participants also have access to the program portal with wellness, nutrition, and fitness resources and tools that help you develop your personalized Health Action Plan.







STATE OF HEALTH is almost entirely virtual with health coaching and primary care video sessions. Program highlights include:

- Personalized health coaching
- Collaborative Health Action Plan development
- Check-in sessions with your health coach to review biometric and health-engagement changes
- Activities and referrals to community-based resources
- Skill groups that cover nutrition, exercise, stress management, getting better sleep, goal setting, and more
- Virtual fitness portal with on-demand and live fitness classes

To get started, complete an application at ColoradoStateOfHealth.com.



## Stay Healthy & Save \$\$\$ With MotivateMe

#### For Cigna & Kaiser Permanente Members

Earn up to \$240 per year while achieving your wellness goals! If you're enrolled in one of the State's medical plans, through Cigna or Kaiser Permanente, you're eligible to earn a \$20 monthly medical premium discount for the following plan year. MotivateMe can help you make positive lifestyle changes, utilize free wellness coaching, reduce healthcare costs, guit smoking, and much more.



#### To start earning your \$20 monthly discount:

- 1. Log on to mycigna.com
- 2. Complete a health assessment
- 3. Complete healthy activities and challenges
- 4. Earn 240 points by June 14, 2023
- 5. Enjoy the savings

PLEASE NOTE: You can only earn one \$240 wellness discount per plan year. You can't double your award by participating in both STATE OF HEALTH and MotivateMe.



## Attention New State of Colorado Employees

Complete your health risk assessment or enroll in STATE OF HEALTH to save money on your monthly medical plan costs!

## Lifestyle Benefits (provided by Securian Financial)

Employees can access several services including:

- Legal, financial, and grief services
- Travel assistance services
- Legacy planning services
- Beneficiary financial coaching services

Visit dhr.colorado.gov/life-insurance to learn more.



Your Employee Assistance Program (EAP) provider is the Colorado State Employee Assistance Program (CSEAP). CSEAP is here to help with life's challenges. Call 800-821-8154 anytime or visit cseap.colorado.gov to learn more.



#### Confidential Mental Health Counseling

Free Sessions: Six (per rolling year)

Choose from individual counseling sessions, couple, or family counseling. CSEAP can serve family members age 15 and older.



#### **Professional Coaching\***

Free Sessions: Three (per rolling year)

CSEAP's personalized professional coaching sessions help you set goals, address difficult workplace relationships, improve soft skills, manage workplace conflict, and more.

\*Coaching and counseling sessions may not be combined to provide additional sessions of either service.



#### **Employee Mediation**

Experiencing any difficulties with a working relationship?\* CSEAP facilitates mediation sessions to help manage or repair workplace relationships.

\*All participants must be State employees with identified concerns associated with the working relationship.



#### 24/7 Crisis Support\*

Free sessions: Unlimited

Call to receive live support for any mental health crisis or concern (experienced by you, a coworker, or someone close to you outside of work). CSEAP crisis support can help you with:

- Family or intimate partner violence
- Substance use concerns
- Traumatic events
- Identifying local resources



## Telehealth & In-person Services Counseling & Coaching\*

State employees can access CSEAP counseling and coaching services from anywhere via video or phone. CSEAP offices in Colorado Springs, Denver, and Grand Junction host in-person sessions. For questions or appointments, call 800-821-8154.

\*CSEAP provides HIPAA-compliant telehealth services and in-person care.

<sup>\*</sup>Mental health crisis support is available to State employees 24 hours per day, 7 days per week.

## Choose the Right Place for Care

Need medical attention but it's not a true emergency? Save time and money by using virtual visits or urgent care.

Emergency room costs are expensive, and visits can take hours. Virtual visits and urgent care centers provide quality care just like the ER, but you could save hundreds of dollars and hours of time for non-life-threatening issues.



S Virtual Visit (Non-Life-Threatening)	\$\$ Everside Health (Non-Life-Threatening) Cigna members only	Primary Care Provider (PCP) (Non-Life-Threatening)	\$\$ Urgent Care Center (Non-Life-Threatening)	\$\$\$ Emergency Room (Life-Threatening)
Benefit:  Lower cost Speak to a doctor from anywhere Reduced waiting room time	Benefit: In-person examination Reasonable price in-network Familiarity with regular PCP	Benefit: In-person examination Reasonable price in-network Familiarity with regular PCP	Benefit:  Lower cost than an ER visit Same-day visits often available	Benefit:  Necessary for life-threatening conditions
Reasons to go:  Headaches Fever & flu symptoms Cough, cold & sore throat Skin irritations & rashes	Reasons to go:  Earaches and infections  Preventive care  Headaches  Regular treatment for chronic conditions  Abdominal pain  Skin irritations & rashes	Reasons to go:  Earaches and infections  Preventive care  Headaches  Regular treatment for chronic conditions  Abdominal pain  Skin irritations & rashes	Reasons to go:  Earaches & infections  Minor cuts, bumps, sprains & burns  Fever & flu symptoms  Allergic reactions  Animal bites  Mild asthma  Headaches  Urinary tract infections  Back & joint pain	Reasons to go:  Sudden numbness or weakness Disorientation or difficulty speaking Seizure or loss of consciousness Severe cuts or burns Overdoses Uncontrolled bleeding Coughing or vomiting blood Heart attack or chest pain

## Your Medical Plan Options

## Which Medical Plan Is Right for You?

When choosing a medical plan, it is important to consider what you want to cover and the total cost of that coverage. This includes what you pay in premiums and what you pay for services out of your own pocket. For the same service, you may pay higher costs with one plan than you will the other. The ideal medical plan should cover most of your health needs and stay within your budget. Review the **Benefit Terms & Definitions** to better understand how the plans work and visit **dhr.colorado.gov/medical-benefits** for plan summaries.

## What You Can Expect

#### **Preventive Care Visits**

Preventive care visits are always no-cost; they help keep you healthy by screening for and preventing serious medical issues. Annual check-ups, flu shots, immunizations, and some tests and screenings are all examples of preventive care.

#### **Outpatient Mental Wellness**

Outpatient mental health services include treatment that takes place in a clinical setting, office, or hospital, but does not involve an overnight stay. These services are 100% covered by the copay medical plans.

#### Virtual Visits & Telemedicine

Skip the waiting room and speak with a board-certified physician over the phone or on your computer. Phone consultations and online video visits give you direct access to a licensed medical professional who can:

- Treat common medical conditions, such as colds, flu, bronchitis, allergies, rashes, etc.
- Provide specialist referrals
- Prescribe short-term medication

**Cigna members:** To schedule an appointment, visit **mycigna.com** or download the myCigna mobile app.

**Kaiser Permanente members:** Visit **kp.org** or download the Kaiser Permanente mobile app.

These services are available with all medical plans (Cigna and Kaiser Permanente). Visit **dhr.colorado.gov/medical-benefits** to see the other medical benefits available to State employees.



## Coverage Cost Comparison

Courses of Chichicable	Cigna			Kaiser Permanente		
Coverage & Highlights	HDHP	Copay Basic	Copay Plus	HDHP	Copay Basic	Copay Plus
Individual Coverage Costs (In-Network)						
Monthly Premium	\$24.24	\$35.96	\$85.06	\$25.78	\$34.80	\$54.42
Deductible	\$1,750	\$1,250	\$750	\$1,500	\$1,500	\$750
Coinsurance	25%	20%	20%	25%	20%	20%
Out-of-Pocket Maximum	\$5,000	\$4,500	\$3,500	\$4,000	\$4,000	\$3,500
Family Coverage Costs (In-Network)						
Monthly Premium	\$232.22	\$251.28	\$408.08	\$197.02	\$284.12	\$387.80
Deductible	\$3,500	\$2,500	\$2,000	\$3,000	\$3,000	\$1,500
Coinsurance	25%	20%	20%	25%	20%	20%
Out-of-Pocket Maximum	\$10,000	\$9,000	\$7,000	\$8,000	\$8,000	\$7,000
Plan Highlights						
No-cost preventive care and preventive medication	✓	✓	✓	✓	✓	✓
Low or no copay for services at Everside Health	✓	✓	✓	-	-	-
Copays for most services	-	✓	✓	-	✓	✓
Coinsurance for services	✓	✓	✓	✓	✓	✓
In-network coverage	✓	✓	✓	✓	✓	✓
Out-of-network coverage	✓	<b>√</b>	✓	-	-	-
Free outpatient mental health coverage	-	<b>√</b>	✓	-	✓	✓
Eligible to enroll in HSA	✓	-	-	✓	-	-
Eligible for the General Purpose FSA	-	<b>√</b>	✓	-	<b>√</b>	<b>√</b>

## Cigna

With Cigna, members have access to a statewide and national network of independent hospitals and doctors including local, high-quality care from top-performing centers of excellence. Visit dhr.colorado.gov/medical-benefits to review the Cigna medical plan summary.





Everside Health offers a high-quality, cost-effective primary care solution for Cigna members.

- Common prescriptions are stocked on location, saving you a trip to the pharmacy
- Standard appointment windows are an hour
- Copay plan members have a \$0 copay
- HDHP members pay a \$40 flat fee until the deductible is met
- Preventive care, virtual care, and care for chronic conditions are available at no cost

Find a health center near you and enroll online at **eversidehealth.com/colorado** or call Everside Health member services at **866-808-6005**.





## Healthcare Bluebook

When you need high-quality care at a fair price, Healthcare Bluebook makes it easy to save money on hundreds of common medical services and procedures. Use Healthcare Bluebook to find the most trusted providers near you and get cash back when you select a fair price facility. Healthcare Bluebook offers:

- Healthcare Pricing Tool: Reduce your healthcare costs by shopping around your local area
- Research & Compare: Learn the fair price for care in your area and compare providers on cost and quality
- Healthcare Bluebook App: Shop and compare pricing while you're on the go (download for free with Apple or Android)

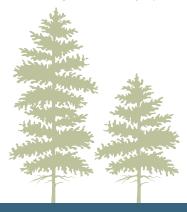
## HINCLUDED HEALTH

For Cigna members, Included Health, formerly Grand Rounds, offers no-cost appointment scheduling and access to remote experts for second opinions and to answer questions about serious medical conditions.

To get started, visit dhr.colorado.gov/included-health.

## Cigna Medical Plan Comparison

The chart below shows a comparison of in-network Cigna plan features. To find an in-network provider, go to mycigna.com. For out-of-network coverage details, visit dhr.colorado.gov/state-employees/benefits.



## Preventive Medication Expansion

Many preventive medications, including insulin, diabetic supplies, some cardiovascular drugs, antidepressants, and more, are available at no cost to you.

Plan Features	HDHP (HSA Qualified)	Copay Basic	Copay Plus
Plati reatures	In-Network	ln-Network	In-Network
Annual Deductible Individual/Family	\$1,7501 / \$3,5001	\$1,2502 / \$2,5002	\$750² / \$2,000²
Annual Out-of-Pocket Maximum³ Individual/Family	\$5,000 / \$8,000 (individual within family) / \$10,000	\$4,500 / \$9,000	\$3,500 / \$7,000
Annual State HSA Contribution Individual/Family	Up to \$720	None	None
	You pay:	You pay:	You pay:
Preventive Care Visit	Covered in full	Covered in full	Covered in full
Primary Care Visit	25% after deductible	\$20 copay	\$20 copay
Everside Health Primary Care Visit	\$40 copay (\$0 for preventive care/virtual visits)	Covered in full	Covered in full
Specialist Visit	25% after deductible	\$40 copay	\$40 copay
Urgent Care	25% after deductible	\$75 copay	\$75 copay
Emergency Room	25% after deductible	20% after deductible	\$1,000 copay (waived if admitted)
Outpatient & Inpatient Hospital Services	25% after deductible	20% after deductible	20% after deductible
Prescription Drugs: Retail (up to a 30	O-day supply)		
Generic	\$10 copay after deductible	\$7 copay	\$10 copay
Brand Formulary	\$40 copay after deductible	\$30 copay	\$30 copay
Non-Formulary	\$60 copay after deductible	\$60 copay	\$60 copay
Specialty	25% after deductible up to \$120 copay	20% up to \$120 copay	20% up to \$120 copay
Prescription Drugs: Mail Order (up to	a 90-day supply)		
Generic	\$20 copay after deductible	\$14 copay	\$20 copay
Brand Formulary	\$80 copay after deductible	\$60 copay	\$60 copay
Non-Formulary	\$120 copay after deductible	\$120 copay	\$120 copay

<sup>&</sup>lt;sup>1</sup>Aggregate deductible <sup>2</sup>Embedded deductible <sup>3</sup>Embedded out-of-pocket maximum

## Kaiser Permanente

Kaiser Permanente (KP) provides healthcare and insurance coverage together. This structure simplifies billing, creates fewer problems with prescriptions, and it's almost impossible to accidentally see non-network providers. Visit dhr.colorado.gov/medical-benefits to review the KP medical plan summary.

## **Facilities**

This patient experience is unique because KP employs its own doctors, nurses, pharmacists, and owns its pharmacies and lab facilities. The providers are usually in the same place, so you can visit a doctor, then walk down the hall to fill a prescription, and get labs and x-rays done—all in one location.

## **KP** Copilot

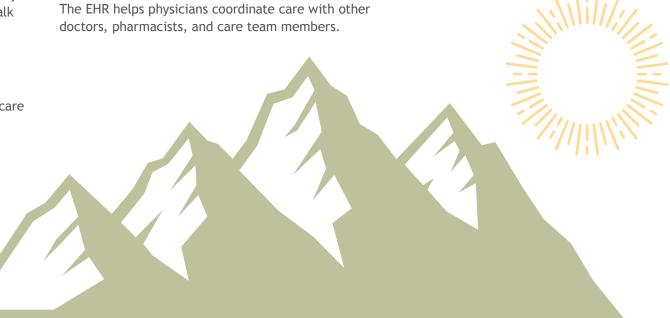
KP Copilot helps members navigate every aspect of care and coverage (including cost estimates).

## Electronic Health Record

Another unique feature of KP is their Electronic Health Record (EHR). This single online medical record is maintained by KP and is used by all of their providers. The EHR helps physicians coordinate care with other doctors, pharmacists, and care team members.



888-413-0591 my.kp.org/stateofcolorado



## KP Medical Plan Comparison

The chart shows a comparison of Kaiser Permanente plan features. To find an in-network provider, go to **kp.org**. There is no out-of-network coverage for KP plans.



## Preventive Medication Expansion

Many preventive medications, including insulin, diabetic supplies, some cardiovascular drugs, antidepressants, and more, are available at no cost to you.

Dian Factures	HDHP (HSA Qualified)	Copay Basic	Copay Plus
Plan Features	In-Network Only	In-Network Only	In-Network Only
Annual Deductible Individual/Family	\$1,500¹ / \$3,000¹	\$1,500² / \$3,000² (Embedded)	\$750 <sup>2</sup> / \$1,500 <sup>2</sup> (Embedded)
Annual Out-of-Pocket Maximum Individual/Family	\$4,000³/ \$8,000³	\$4,0004 / \$8,0004	\$3,5004 / \$7,0004
Annual State HSA Contribution Individual/Family	Up to \$720	None	None
	You pay:	You pay:	You pay:
Preventive Care Visit	Covered in full	Covered in full	Covered in full
Primary Care Visit	25% after deductible	\$15 copay	\$10 copay
Specialist Visit	25% after deductible	\$35 copay	\$25 copay
Urgent Care	25% after deductible	\$75 copay	\$75 copay
Emergency Room	25% after deductible	20% after deductible	\$500 copay (waived if admitted)
Outpatient & Inpatient Hospital Services	25% after deductible	20% after deductible	20% after deductible
Prescription Drugs: Retail (up to a	30-day supply)		
Preventive		Covered in full if prescribed by a doctor	
Generic	\$10 copay after deductible	\$10 copay	\$10 copay
Brand Formulary	\$30 copay after deductible	\$30 copay	\$30 copay
Non-Formulary	\$60 copay after deductible	\$60 copay	\$60 copay
Specialty	20% after deductible, up to \$120 copay	20% up to \$120 copay	20% up to \$120 copay
Prescription Drugs: Mail Order (up	to a 90-day supply)		
Generic	\$20 copay after deductible	\$20 copay	\$20 copay
Brand Formulary	\$60 copay after deductible	\$60 copay	\$60 copay
Non-Formulary	\$120 copay after deductible	\$120 copay	\$120 copay

 $<sup>^1</sup>$ Aggregate deductible  $^2$ Embedded deductible  $^3$ Aggregate out-of-pocket maximum  $^4$ Embedded out-of-pocket maximum

## Health Savings Account (HSA)

If you enroll in a High-Deductible Health Plan (HDHP), you may be eligible to open a Health Savings Account (HSA), through Optum Bank. This savings account can help pay for eligible healthcare expenses not covered under your medical, dental, or vision plan and save for future care needs in retirement.

## How are contributions made to my HSA?

You can contribute pre-tax or post-tax\* dollars from your paycheck up to the annual IRS maximums, shown below. To be eligible for the State's HSA contribution of \$60 per month, you must complete the following three steps in **benefitsolver**:

- 1. Enroll in either the Cigna HDHP or the KP HDHP
- 2. Elect the HSA option
- 3. Agree to the terms and conditions

Once all steps are completed and the State receives your account information from Optum Bank, the State's HSA contributions will begin.

Coverage Type	2022 Employer HSA Contribution	2022 Employee Maximum Contribution	2022 IRS Contribution Limit
Individual Coverage	Up to \$720	\$2,930	\$3,650
Family Coverage	Up to \$720	\$6,580	\$7,300
Age 55+ Catch-up Contribution	Additional \$1,000		

<sup>\*</sup>Pre-tax elections are made within benefitsolver; post-tax elections are handled through your payroll office.

# Six Reasons to Enroll in an HSA-Qualified Plan



- 1. Contributions, interest, and qualified purchases are all tax-free
- 2. It's your account, your HSA goes with you if you leave the State of Colorado
- 3. Funds don't expire and there's no "use it or lose it" provision
- 4. HSAs can make a great retirement savings account
- 5. Once your HSA balance reaches the investment threshold (\$2,000), you can choose to invest your HSA funds and earn tax-free interest
- 6. The State of Colorado puts money into your account every year

## What about the fine print?

- You must be enrolled in a qualified HDHP to contribute to an HSA, such as the Cigna HDHP or KP HDHP
- You cannot be covered under another non-qualified health plan, including your spouse's Health Care Flexible Spending Account
- You cannot be enrolled in Medicare or Tricare
- You cannot be claimed as a dependent on someone else's tax return

Refer to IRS Publication 969 for a complete list of eligible expenses and HSA rules.

## **Dental Plans**

Our dental plans help you maintain a healthy smile through regular preventive dental care and offer coverage to fix problems early. To find an in-network dental provider, visit **deltadentalco.com** or download the Delta Dental mobile app.

	Delta Dental of Colorado (DDCO)			
Plan Features	Basic Dental Plan	Basic Plus Dental Plan		
	You pay in-network:	You pay in-network:		
Calendar Year Deductible (waived for Preventive Services) Individual/Family	\$50 / \$150	\$50 / \$150		
Calendar Year Benefit Maximum	\$1,500/person	\$3,000/person		
Diagnostic & Preventive Services (e.g., x-rays, cleanings, exams)	Covered in full	Covered in full		
Basic & Restorative Services (e.g., fillings, extractions, root canals)	30%	20%		
Major Services (e.g., dentures, crowns, bridges)	50%	50%		
Orthodontia	Not covered	50%		
Orthodontia Lifetime Maximum	Not covered	\$3,000/person		

Your Cost for Coverage	Basic Dental Plan	Basic Plus Dental Plan
Employee Only	\$4.44	\$9.80
Employee + Spouse	\$16.28	\$26.74
Employee + Child(ren)	\$15.24	\$26.24
Employee + Family	\$27.98	\$44.06

## Get to Know Your Provider Options



- Preferred Provider Organization (PPO) & premier providers: Receive the greatest level of savings with no hidden costs
- Non-participating providers: You may be billed for the difference between the cost and Delta Dental of Colorado's (DDCO's) reimbursement level since these providers are not affiliated with DDCO

## Right Start 4 Kids (RS4K)

The Right Start 4 Kids Program, through DDCO, provides 100% coverage for enrolled children up to their 13th birthday when receiving dental care in-network. Orthodontia services are not eligible.

**Don't forget:** Dental coverage is FREE for enrolled children under age five. When your eldest or only enrolled child turns five, you will see an increase in cost.

## Vision Plans

Keep your vision clear with regular eye exams. Our vision plans offer an extensive network of optometrists and vision care specialists. To find an in-network provider near you, visit eyemed.com and select, 'insight network.' Remember, you'll save money by visiting in-network providers.



	EyeMed			
Plan Features	Basic Vision Plan	Enhanced Vision Plan		
	You pay in-network:	You pay in-network:		
Exam every 12 months	\$25 copay	\$10 copay		
Frames every 12 months	\$130 allowance, plus 20% off balance	\$225 allowance, plus 20% off balance		
Lenses every 12 months (single vision, bifocal, trifocal, lenticular)	\$25 copay	\$25 copay		
Contact Lenses (in lieu of lenses and	frames) every 12 months			
Medically Necessary	Covered in full	Covered in full		
Disposable	\$130 allowance	\$225 allowance		
Conventional	\$130 allowance, plus 15% off balance	\$225 allowance, plus 15% off balance		

Your Cost for Coverage	Basic Vision Plan	Enhanced Vision Plan
Employee Only	\$0	\$4.40
Employee + Spouse	\$0	\$8.36
Employee + Child(ren)	\$0	\$8.80
Employee + Family	\$0	\$12.92

## KP Vision Coverage

For KP members, vision coverage is already provided in your medical plan, but you can still select EyeMed coverage. Review the plan summaries on dhr.colorado.gov/medical-benefits to see the KP vision coverage.



## Flexible Spending Accounts (FSAs)

Flexible Spending Accounts (FSAs), administered by WEX, offer a smart way to stretch your dollars by setting aside pre-tax dollars to pay for eligible healthcare and dependent care expenses.

Each plan year (July 1 - June 30), you must elect the annual amount you want to contribute to each account.

Your contributions will be deducted pre-tax from your paycheck which helps reduce your taxable income.

	General Purpose Health Care FSA	Limited Purpose Health Care FSA	Dependent Care FSA
Eligibility	Eligible employees who are not enrolled in the HDHP	HDHP participants only	All eligible employees
Annual Contribution Limit	\$2,850	\$2,850	\$5,000 (\$2,500 if married and filing separately)
Eligible Expenses*	Healthcare plan deductibles, copays, coinsurance, and prescriptions, including dental and vision hardware and expenses	Dental and vision expenses only	Daycare for children age 12 and under, disabled children, and dependent adults
Availability of Funds	The full annual amount you elect is available on your plan effective date	The full annual amount you elect is available on your plan effective date	You can be reimbursed up to the amount available in your account
Payment or Reimbursement Options	Debit card or reimbursement	Debit card or reimbursement	Debit card or reimbursement
Rollover Amount	Yes, you may rollover up to \$570 of unused funds from FY 2022-23 when you re-enroll for FY 2023-24	Yes, you may rollover up to \$570 of unused funds from FY 2022-23 when you re-enroll for FY 2023-24	Unused funds do not rollover
Services Deadline	Services must be incurred by 6/30/2023	Services must be incurred by 6/30/2023	Services must be incurred by 9/15/2023
Submission Deadline for Reimbursement	Reimbursement must be submitted by 10/15/2023	Reimbursement must be submitted by 10/15/2023	Reimbursement must be submitted by 10/15/2023

<sup>\*</sup>Refer to IRS Publication 502 and 503 for a complete list of eligible expenses.

photo by: Linda Stiles

## Life and AD&D Insurance

Life and Accidental Death and Dismemberment (AD&D) insurance, through Securian Financial/Minnesota Life Insurance Company, provide financial security to you and your family if you pass away or become seriously injured.

#### Basic Life and AD&D Insurance

As an eligible employee, you receive Basic Life and AD&D insurance equal to your annual earnings subject to a minimum benefit of \$50,000 and a maximum of \$250,000. Basic Life and AD&D are provided by the State of Colorado at no cost to you.

## Optional Life and AD&D Insurance

In addition to Basic Life and AD&D, you may buy Optional Life and AD&D coverage at discounted rates.

Benefit Features	Optional Life and AD&D Options			
	Employee	Spouse	Dependent Child(ren)	
Coverage Options	\$10,000 increments	\$10,000 increments	\$5,000 increments	
Maximum*	\$500,000	\$250,000 (cannot exceed 50% of employee coverage)	\$10,000 (cannot exceed 50% of	
Guaranteed Issue Amount	\$150,000	\$30,000	employee coverage)	
Guaranteed Issue Period	Within 31 days of benefits eligibility or a Qualifying Life Event (QLE)			

<sup>\*</sup>Evidence of Insurability (EOI) may be required.

Current Optional Life participants (minimum of \$10,000 of coverage) may increase their Optional Life insured amount by up to \$50,000 per year in \$10,000 increments until they reach the guaranteed issue maximum of \$150,000.

Employees must satisfactorily complete Evidence of Insurability for coverage amounts greater than \$150,000. The \$50,000 per year guaranteed increase is available for employee coverage only.

## Choosing a Beneficiary

You can choose any person, trust, or nonprofit as the beneficiary (recipient) of your Life/AD&D policy in the event of your death. Review your beneficiary selection periodically to ensure it reflects your current wishes. Change your beneficiary anytime at benefitsolver.com.



## Enrollment & EOI

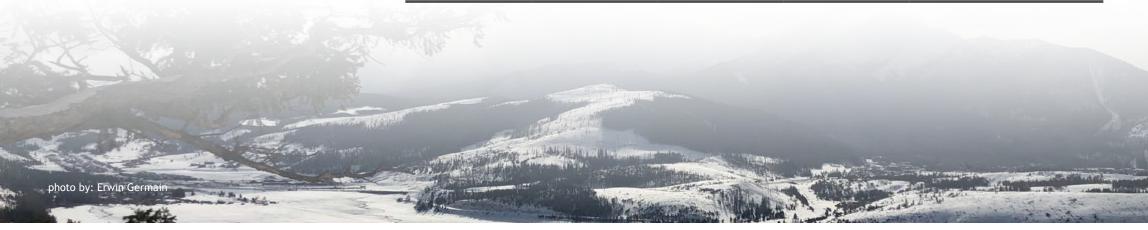
Enrollment and Evidence of Insurability (EOI) is completed at **benefitsolver.com**. This is required when you or your spouse apply for new coverage or increase coverage outside your new hire enrollment and during Open Enrollment.

## How much Optional Life and AD&D Insurance should I buy?

When deciding how much Optional Life and AD&D coverage to buy, consider the following:

- 1. How much will your dependents need to pay debts, such as a mortgage, car loan, or credit card balances?
- 2. How much will your dependents need to maintain their current standard of living?
- 3. What kind of future do you want to provide for your dependents or others who depend on you for financial support?

Optional Life and AD&D Monthly Premiums				
Employee		Spc	ouse	Child(ren)
Age	\$ Amount/ \$10,000 of Coverage	Age	\$ Amount/ \$10,000 of Coverage	Cost for Coverage Options
Under 30	\$0.60	Under 30	\$0.80	
30-34	\$0.80	30-34	\$1.00	
35-39	\$0.80	35-39	\$1.20	
40-44	\$1.00	40-44	\$1.20	Option 1 \$5,000:
45-49	\$1.00	45-49	\$1.80	Option 1 \$5,000: \$0.50/month per family unit Option 2 \$10,000: \$1.00/month per family unit
50-54	\$1.20	50-54	\$2.60	
55-59	\$2.60	55-59	\$4.60	
60-64	\$4.00	60-64	\$6.80	
65-69	\$8.00	65-69	\$13.40	
70+	\$12.20	70+	\$21.20	



## Disability Coverage

If you experience an injury or illness that prevents you from working, disability coverage provides partial income replacement to assist you financially. Paid leave may be used to supplement these benefits. Contact your Benefits Administrator at dhr.colorado.gov/contact for more information.

## Short-Term Disability (STD)

Short-Term Disability coverage, through Unum, provides some income replacement if you are unable to work due to an illness or injury. You are automatically enrolled in STD at no cost to you. Coverage is effective the first day of the month following your date of hire.

Short-Term Disability (STD)			
Percent of Earnings 60%			
Weekly Maximum	\$3,000		
Waiting Period	30 days		
Maximum Duration	150 days during a 12-month period		

## Optional Long-Term Disability (LTD)

Optional Long-Term Disability pays you 60% of your earnings if you cannot work for an extended period due to a disabling illness or injury. Employees regularly scheduled to work 12+ hours/week are eligible to enroll.

Optional Long-Term Disability (LTD)		
Percent of Earnings 60%		
Monthly Maximum	\$10,000	
Waiting Period 180 calendar days		
Maximum Duration	Up to age 65 (longer if disabled after age 60)	

Benefits are reduced by other sources of disability income you may qualify for such as PERA disability benefits and Workers' Compensation.

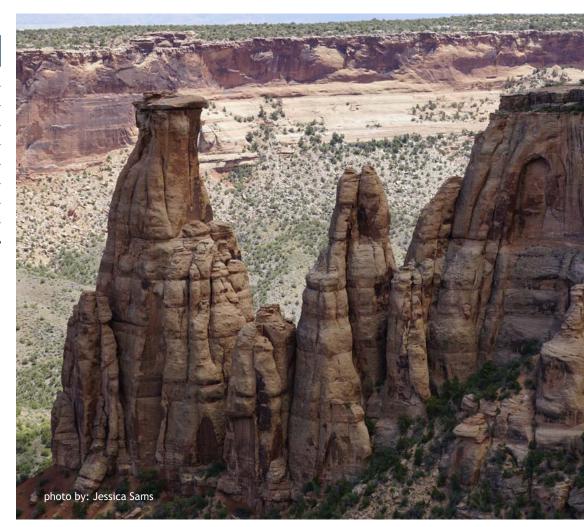


## Optional LTD Monthly Premium Rates

Age on December 31 of Last Year	PERA Vested Rates	PERA Non-Vested & Defined Contribution Rates
Under 34	\$0.0008	\$0.0025
35-39	\$0.001	\$0.0030
40-44	\$0.0013	\$0.0037
45-49	\$0.0017	\$0.0052
50-54	\$0.0026	\$0.0079
55-59	\$0.0040	\$0.0118
60-64	\$0.0055	\$0.0174
65-69	\$0.0059	\$0.0178
70+	\$0.0072	\$0.0216

#### Calculate Your LTD Premium

Example: You are 42 years old and are vested in the PERA Defined Benefit Retirement Plan with a monthly covered salary of \$4,000. The PERA Vested premium rate is \$0.0013 multiplied by your monthly covered salary of \$4,000, which equals \$5.20 per month.



# Your Benefit Contacts

PLEASE NOTE: PERA will reach out with your enrollment options.

This guide provides an overview of the benefits program. It is not intended to be a complete description of the benefits or official summary plan descriptions for these programs. A more detailed summary plan description for each plan can be found on the State of Colorado's Employee Benefits page. If there is a conflict between this guide and the official plan documents, the plan documents will govern. The State of Colorado reserves the right to modify or terminate any of the described benefits at any time and for any reason. The descriptions of these benefits are not a guarantee of current or future employment or benefits. For information about the specific plans available to you, please contact your agency's Benefits Administrator.

©2022 Communication Partners, Inc. commpart.com

Coverage	Contact	Phone/Email	Website
Enrollment & Eligibility	Agency Benefits Administrator	Benefits Administrator Contact List	dhr.colorado.gov/state-employees/benefits
Medical	Cigna Group ID: 3343452	800-244-6224	mycigna.com
	Kaiser Permanente Group ID: 00225	888-413-0591 KP Copilot: 888-413-0591 stateofcolorado@kp.org	Member: kp.org Non-member: my.kp.org/stateofcolorado
Primary Care Services	Everside Health*	866-808-6005	eversidehealth.com/colorado
Pharmacy	OptumRx* Group ID: CO1ORADO	844-564-2201 800-498-5428 (TDHI)	optumrx.com
	Cigna Telehealth Connection*	855-673-3063 Or call the number on the back of your Cigna ID card	mycigna.com
Virtual Visits/Telemedicine	Everside Health*	866-808-6005	eversidehealth.com/colorado
	Kaiser Permanente	303-338-4545	kp.org
Health Savings Account (HSA)	Optum Bank Group ID: 718733B	866-234-8913	optumbank.com
Dental	Delta Dental Group ID: 7649	800-610-0201	deltadentalco.com
Vision	EyeMed Group ID: 1028431	888-485-5174	eyemed.com
Wellness	State of Colorado	state_wellness@state.co.us	dhr.colorado.gov/employee- wellness-program
Colorado State Employee Assistance Program (CSEAP)	State of Colorado, CSEAP	800-821-8154	cseap.colorado.gov
Flexible Spending Account (FSA)	WEX Group ID: 34624	866-451-3399 customerservice@discoverybenefits.com	wexinc.com/solutions/benefits
Life and AD&D	Securian Financial/ Minnesota Life Insurance Company Group ID: 33780-G	833-810-8260	lifebenefits.com
Disability	Unum	866-679-3054	unum.com/employees
Retirement	Public Employees, Retirement Association (PERA)	800-759-7372	copera.org peraontheissues.com (public policy blog)

<sup>\*</sup>For Cigna members only.

## Helpful Terms & Definitions

## Balance Billing

When a healthcare provider bills a patient for the difference between what the health insurance reimburses and what the provider charges.

## Coinsurance

The percentage paid for a covered service, shared by you and the plan.

## Copay

A fixed dollar amount you pay the provider at the time of service.

## Deductible

The amount you pay each plan year before the plan begins paying benefits.

## Deductible (Aggregate)

All family members contribute toward the family deductible. The plan does not pay for any individual until the total family deductible is met.

## Deductible (Embedded)

A plan featuring an individual deductible within a family deductible. Any costs you pay toward the individual deductible also count toward the family deductible. If one family member meets the individual deductible, they will receive benefits even if the family deductible is not met.

## Emergency Room Care

Care received at a hospital emergency room for life-threatening conditions.

## In-Network Care

Care provided by contracted doctors and hospitals within the plan's network of providers.

## Out-of-Network Care

Care provided by a doctor or at a facility outside of your plan's network. Costs may be higher and services subject to balance billing.

## Out-of-Pocket Maximum

The maximum amount you pay each year before the plan begins paying 100% for covered expenses.

# Out-of-Pocket Maximum (Aggregate)

If you have other family members in this plan, the full family out-of-pocket maximum must be met before the plan begins paying 100% for covered expenses.

## Out-of-Pocket Maximum (Embedded)

After each family member meets their individual out-of-pocket maximum, up to the full family out-of-pocket maximum, the plan will pay 100% of covered expenses.

## Post-Tax Premium

The cost for benefits paid after taxes are deducted. Post-tax premiums do not reduce your yearly taxable income.

#### Pre-Tax Premium

The cost for benefits paid before taxes are deducted. Pre-tax premiums lower your yearly taxable income, which reduces your federal and state income tax liability. May impact PERA contributions and retirement benefits.

## Preventive Care

Routine healthcare, including annual physicals and screenings, to prevent disease, illness, and other health issues.

## **Urgent Care**

Use for sudden illnesses or injuries that are not life-threatening. Urgent care centers are helpful when care is needed quickly to avoid developing more serious pain or problems. Take special care to ensure the network status of the facility.

